## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Amount  Fights Campaign Equality Votes  Check if 24-hour report 48-hour report New Haven  City State Zip Code  New Haven  Purpose of Expenditure  Website content development  Fights Campaign Equality Votes  Fights Campaign Equality Votes  New report Amends report filed on Man / Date of Public Distribution  Date of Public Distribution  Amount  Transaction ID: D630019  Date of Disbursement or Category/  Category/  Table 18  Category/  Category/  The Amount Date of Disbursement or Category/  Category/  Contract Category/  C	Y = Y = Y	
Human Rights Campaign Equality Votes  Check if 24-hour report 48-hour report New report Amends report filed on Date of Public Distribution, Off 18  Full Name of Payee Digital Surgeons  Mailing Address 1175 State St Ste 219  City State Zip Code New Haven CT 06511  Purpose of Expenditure Website content development	/Dissemination	
Check if 24-hour report	Y Y Y Y	
Check if 24-hour report 48-hour report New report Amends report filed on  Full Name of Payee Digital Surgeons  Mailing Address 1175 State St Ste 219  City State Zip Code New Haven CT 06511  Purpose of Expenditure Website content development  Category/  Mamends report filed on  Date of Public Distribution  Table 18  Amount  Transaction ID: D630019  Date of Disbursement or C	Y Y Y Y	
Digital Surgeons  Mailing Address 1175 State St Ste 219  City State Zip Code  New Haven CT 06511  Purpose of Expenditure  Website content development  Category/  Page 129  Category/  Mary 129  Mar	Y Y Y Y	
Mailing Address 1175 State St Ste 219  City State Zip Code  New Haven CT 06511  Purpose of Expenditure  Website content development  Category/  Mark Category/  Category/  Mark Category/  Mar		
City State Zip Code  New Haven CT 06511  Purpose of Expenditure  Website content development  Category/  Category/  Purpose of Expenditure		
New Haven CT 06511 Transaction ID : D630019  Purpose of Expenditure  Website content development  Category/  Category/		
Purpose of Expenditure Website content development  Category/  Category/  Date of Disbursement or C	1750.00	
Website content development		
Type 07 18	2016	
Name of Federal Candidate Support Office Sought: House	District:00	
Donald J. Trump  Oppose  President  Senate	State:	
Calendar Year-To-Date Per Election for Office Sought  Disbursement For: □ Primary 2016 □ Other (specify) ▶	y X General	
Full Name of Payee Date of Public Distribution	n/Dissemination	
Left Hand Strategies	2016	
Mailing Address 477 Bergen Street #3  Amount		
City State Zip Code	6450.00	
Brooklyn NY 11217 Transaction ID : D630020 Date of Disbursement or 0	Obligation	
Purpose of Expenditure  Email development  Category/  Category/	YYYY	
Email development Type 07 18	2016	
Name of Federal Candidate Support Office Sought: House	District:00	
Donald J. Trump  Oppose  President  Senate	State:	
Calendar Year-To-Date Per Election for Office Sought  Disbursement For: Primary 2016  Other (specify) ▶	y X General	
Curer (specify) P		
(a) SUBTOTAL of Itemized Independent Expenditures	8200.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Mr. James Rinefierd  [Electronically Filed] Date 07 18 201	Y Y 16	
Signature		

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

NAME OF COMMITTEE (In Full) Human Rights Campaign Equality Votes	FEC IDENTIFICATION NUMBER ▼  C C00508440	
	C C00508440	
Check if 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
	of Public Distribution/Dissemination	
Bully Pulpit Interactive LLC	07 18 2016	
Mailing Address 1140 Connecticut Ave NW Ste 800 Amou		
City State Zip Code	3050.00	
Washington DC 20036 Trans Date	saction ID : D630021 of Disbursement or Obligation	
Purpose of Expanditure	07 / 18 / 2016	
Name of Federal Candidate Support Office Sough	ht: House District: 00	
Donald J. Trump Oppose Presid	dent Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disbursement 2016		
Tel Electrici Isl ellice edegin	Other (specify)	
Human Rights Campaign	of Public Distribution/Dissemination	
Mailing Address 1640 Rhode Island Ave NW Amou	07 18 2016 ount	
City State Zip Code	3095.86	
Date	saction ID : D630022 of Disbursement or Obligation	
Purpose of Expenditure Staff time - online advocacy  Category/ Type	07 / 18 / 2016	
Name of Federal Candidate Support Office Soug	ht: House District: 00	
Donald J. Trump  Oppose  Presid		
Calendar Year-To-Date Per Election for Office Sought  Disburseme 2016	ent For:  Primary	
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Mr. James Rinefierd [Electronically Filed] Date 07	18 2016	
Signature		

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## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Human Rights Campaign Equality Votes	C C00508440	
Check if 24-hour report  48-hour report  New report Amends report f	filed on M M M / D D / Y Y Y Y Y	
Full Name of Payee	Date of Public Distribution/Dissemination	
Human Rights Campaign	07 18 2016	
Mailing Address 1640 Rhode Island Ave NW	Amount	
City State Zip Code	600.00	
Washington DC 20036	Transaction ID : D630024  Date of Disbursement or Obligation	
Purpose of Expenditure Website videos  Category/ Type	07   D D   Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate Support O	office Sought: House District: 00	
Donald I Trump	President Senate State:	
Calcillati Total To Bato	isbursement For: Primary General	
F. III Name of Days	Other (specify)	
Full Name of Payee	Date of Public Distribution/Dissemination	
Mailing Address	Amount	
City State Zip Code		
	Date of Disbursement or Obligation	
Purpose of Expenditure  Category/ Type	Man / Dad / Yayayay	
Name of Federal Candidate	Office Sought: House District:	
Зиррогі	Office Sought: House District:	
	Disbursement For: Primary General  Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	14945.86	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Mr. James Rinefierd [Electronically Filed] Date	07 18 2016	
Signature		

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